

## I. SOCIALINIS DARBAS SOCIAL WORK

### A COMPARISON OF THE RELATIONAL BOND OF ADOLESCENTS FROM THE DIFFERENT TYPES OF FAMILY

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#### Abstract

*The contribution deals with the relational bond issues of adolescents who grow up in a complete nuclear family or in a single-parent family and in a children's home. Elements of attachment theory have been embraced by the practitioners endeavoring to assist foster and adopted children and their parents.*

*The E.M.B.U questionnaire is used as a methodological tool that assesses perceived parental rearing style, comprising 3 sub scales (Emotional Warmth, Rejection, Over-protection). The survey sample consisted of the total of 110 respondents; 35,5% of the respondents from a complete nuclear family, 18,2 % of the respondents being raised in a single-parent family and 46,2 % of the respondents who have grown up in a children's home.*

*The primary results show that the respondents from the complete families perceive the mother and father as emotionally warm-hearted, less rejecting and overprotective. On the contrary, children from the children's homes perceive the parents as more rejecting, less emotional warm-hearted and less overprotective. Professionals who approach their work from the paradigm of attachment theories may incorporate ideas from earlier work to integrate an understanding of the attachment between family members and behavioral interventions that help to modify parent – child relationships (Greenberg & Speltz, 1988; Speltz, 1990; Scott, 2003).*

**Keywords:** *relation bond, emotional warmth, rejection, over-protection, children home.*

## Introduction

The relational attachment (emotional bond) of a child to the relational person (caregiver) represents one of the important determinants of a personality development. The attachment theory originated in the fifties of the last century as a result of Bowlby's long – time work. Based on his own findings Bowlby conceived attachment theory, which supposes that a child has an instinctive tendency to be tied to his or her mother or maternal person (Bowlby, 1958). M. Lečbych and K. Pospíšilková (2012, p. 2) define relational attachment as “a unique emotional bond between child and care-giver (the most often mother). It is a relation arising on the basis of basic trust or distrust between these individuals and it creates foundation for establishing subsequent complex relationships.”

A child forms his or her internal model on the basis of trust experiencing which later determines his or her „relational style“. Early experiences of defective relationships lead to defective internal model forming and they cause that an individual reacts pathologically to later experiences of loss or rejection (Hašto, 1998, as cited in Ranincová, 2004). This internal working model exceeds the early childhood period and it persists in a certain form into adulthood. An important time is adolescence, which is significant transitional period between childhood and adulthood. At first sight, adolescence may look like emotional separation from parents, since a lot of adolescents experience relations with parents as restrictive and they manifest behaviour aiming to autonomy. However, this demonstration should be perceived as a development context demonstration, not as an importance losing of a relational bond. On the contrary, the relational attachment plays key role to fulfil developmental needs during adolescence period. It is a transition from one period with intense experiences of relational attachment (childhood) to another period of the same intense experiences in new relationships (adulthood) (Land, 1999, as cited in Adamová & Halama, 2009). As for changes in parent-child relationships, adolescence is the time when many parents grant more autonomy to their children in relation to social networking sites use (Izrael, 2017). Our contribution presents the concept of the

attachment theory which is extremely important for the healthy, correct and harmonious development of an individual. It points out the attachment theory application in social works with family and attachment theory application in the orphanage. It characterizes the planning of the work in the orphanage and initiatives for the work with children and teenagers who grow up in the orphanage. The research provides the finding out of the attachment types of adolescents from complete and incomplete families and teenagers from the orphanage in the age range of 14 to 19 in the relation to the remembered family behaviour. We can state that this kind of research has not yet been implemented in our geographical conditions. For this reason, we perceive the choice of survey sample as very important and beneficial.

## 1. Theoretical bases of the relation attachment

The styles of the relational attachment are manifested by certain patterns of perception feeling, thinking, expectations and readiness for action in situations which are important for relational attachment. We differentiate a few empirical types of the relational attachment (Höger, 1999, as cited in Hašto, 2009):

- Secure attachment style is developing on the basis of interaction with responsive relational person providing sufficient amount of proximity and this person is within easy reach, reacting positively to calling, while this person perceives the child's signals, interprets them properly and reacts adequately and promptly. Later, when an individual with this attachment experience has activated relational attachment system (e.g. in situations of sorrow and need, fatigue, distress, discomfort or disease), he or she is positive that proximity and support of important person is available and this individual shows openly his or her need for favour, proximity and help as well as he/ she expects with certainty that this need will be satisfied adequately.
- Insecure (avoidant) attachment style is organized due to interaction with relational individuals who are not available during activated system of child's attachment behavior, or they are only available when a child signals his or her need of proximity with restraint. The adaptive deactivating strategy is developing, which is associated with crushing the attachment behavior and related needs and emotions.
- Insecure (ambivalent) attachment style is the result of interaction with the relational people who used to express affection sometimes but they followed their own needs and not child's needs, so their availability was unreliable or it was available only by escalated attachment behavior. It is adaptive hyper-vigilant strategy, the relational attachment system is activated permanently, an individual constantly has to strive for relational person availability and he or she reacts by exaggerated attachment behavior to stressful situations.

According to J. Hašto (2005), there are a lot of very strong emotions which arise in the process of creating, constituting, maintaining, interruption and restoring of the relational attachment. Establishing the relational attachment could be described as falling in

love, maintaining the attachment as love. The loss causes mourning, grieving. The threat of loss causes anxiety and factual loss produces sadness and both situations most likely will cause an anger. Steady duration of the relational attachment is experienced by human being as a source of certainty, security, calmness, wellbeing.

According to attachment theory, primary relation to the mother (or attachment figure) is a prototype for all other relationships in life. The theory was created on psychoanalysis ground after observation the cases of severe disturbance of attachment to the mother (Adamove, 2017).

Study of attachment in the 1970s and 1980s focused on operationalizing and validating many of the tenets of attachment theory articulated in Bowlby's landmark trilogy, *Attachment and Loss* (Bowlby, 1982, 1973, 1980), robustly underscoring the central role of child to parent attachment in the child's development and mental health. Attachment theory and its implications have long interested clinicians, though determining how best to translate complex theoretical constructs and research methods into the clinical arena has been challenging. Nevertheless, well-defined landmarks in early childhood attachment are clinically useful, and the emergence of interventions drawn from systematic research is promising.

Bowlby defined attachment in young children as "a strong disposition to seek proximity to and contact with a specific figure and to do so in certain situations, notably when frightened, tired or ill" (Bowlby 1969/1982, p. 371). In contemporary use, attachment refers to the infant's or young child's emotional connection to an adult caregiver – an attachment figure – as inferred from the child's tendency to turn selectively to that adult to increase proximity when needing comfort, support, nurturance or protection. Importantly, attachment behaviors are distinguished from affiliative behavior or social engagement with others because they involve seeking proximity when experiencing distress. According to Bowlby, the attachment behavioral system operates in tandem with the exploratory behavioral system, such that, when one is highly activated, the other is deactivated. In other words, if a child feels secure in the presence of an attachment figure, the child's motivation to venture out and explore intensifies. If the child becomes frightened or stressed, however, the child's motivation to explore diminishes, and the motivation to seek proximity intensifies (Zeanah & Berlin & Boris, 2011).

In case that, psychological (emotional) needs of a child at the early age are not satisfied adequately, when a child doesn't have attachment figure at his or her disposal, it comes about states of deprivation. The authors J. Langmeier, Z. Matějček (2011, p. 26), who devoted themselves to the concept of psychological deprivation, define psychological deprivation as a „mental state caused by such living situations when a subject is not given an opportunity for satisfying some his or her basic (vital) mental need in sufficient measure and longtime enough.“ The author M. Vágnerová (2008) adds that deprivation is caused by the shortage of specific emotional stimuli, the absence of stable and reliable relationship with the maternal person and implied security and safety disturbance. We suppose that problematical development of the attachment may arise especially in cases when children live in orphanages, where this phenomenon was researched by the above mentioned authors. Also, according to J. Mikloško (2013), the relational attachment to

the mother and father is important protective factor determining healthy, versatile development of a child. As quoted author points out the establishing of healthy attachment in orphanages is more or less limited.

In species-typical rearing conditions, virtually all children develop attachments to their caregivers, and Strange Situation Procedure (SSP) classifications of attachment define qualitatively different patterns. In more extreme rearing conditions, as noted above, such as social neglect or institutional care, attachment may be seriously compromised or even absent. Attachment disorders describe a constellation of aberrant attachment behaviors and other behavioral anomalies that are defined as resulting from social neglect and deprivation. Obviously, no disorder of attachment can exist before a child forms selective attachments, so a developmental age of 9–10 months ought to be required to make the diagnosis.

Attachment disturbances are inherent in foster care for several reasons. First, young children are disproportionately likely to be classified as disorganized in relation to their maltreating parents, with rates of disorganization found to be as high as 90% (Cicchetti, Rogosch & Toth, 2006). Second, as noted, maltreatment, and specifically neglect, are necessary but not sufficient as etiologic conditions for attachment disorders (Zeanah & Smyke, 2009). Third, maltreated children who are removed from their primary caregivers and placed with foster parents they often have never seen before must form attachments to entirely new care-givers. Finally, these children must attempt to resolve and/or repair attachments to their biological parents even as they develop new attachments to foster parents.

An initial question for clinicians evaluating young children in foster care is whether they are attached to anyone. For example, one study found that about a third of 1- to 4-year-old children removed from their parents and placed in foster care had limited or no attachments three months after their removal (Zeanah et al., 2004). Dozier and colleagues (Stovall-McClough & Dozier, 2004) had foster parents complete structured daily diaries to describe the nascent attachment behaviors of the young children in their care. They noted that attachments began to organize as secure, avoidant or resistant patterns within days to weeks of placement. Thus, attention to development and quality of attachment to foster parents should be monitored from the outset. Important questions for the clinician include: Does the child consistently turn to preferred attachment figures for comfort, support, nurturance and protection? Does the child directly express negative emotions? Is the child convincingly comforted when seeking it from preferred attachment figures?

On the basis of the above mentioned theoretical foundations we suppose that insecure relational attachment will be represented by the respondents in orphanages in the highest rate, on the contrary, the lowest rate will occur in complete families.

## 2. Research methodology

**The aim and object of research.** The aim of the research is to identify differences in the attachment between children from a complete family, a single-parent family and an orphanage.

**The method of research.** The research was carried out by a quantitative strategy, using a E.M.B.U questionnaire ("Own memories of parental rearing behavior") was measured attachment. The E.M.B.U questionnaire consists of 23 items and the respondents answer individually for their mother and father on the 4-point Likert scale. It is used to evaluate how the adult respondents remember the rearing behavior of their parents. It consists of three factors (sub-scales):

- Rejection – contains 7 items including punishment, humiliation, favouring of siblings over the survey subject, rejection through criticism, rejection of the subject as a personality and insulting;
- Emotional warmth – consists of 6 items including praising, stimulating and affectionate behavior;
- Overprotection – consists of 10 items including worry and anxiety regarding the subject's safety, intrusiveness and over-involvement.

Data processing was implemented through descriptive and inductive statistics. The Mann-Whitney U-test and Kruskal-Wallis test were used to find differences in attachment between children from a complete family, a single-parent family and an orphanage.

**Research questions.** Based on the setup goal, research questions were formulated:

SQ1: Is there a statistically significant difference in the scale of rejection by the mother and the father reported by children from complete families, single parent families and orphanages?

SQ2: Is there a statistically significant difference in the scale of emotional warmth from the mother and the father reported by children from complete families, single parent families and orphanages?

SQ3: Is there a statistically significant difference in the scale of overprotection by the mother and the father reported by children from complete families, single parent families and orphanages.

**Sample of respondents.** The survey sample consisted of 110 adolescents at the ages between 14 and 19 (AM 16.32, SD 1.188), of which 48.2% were men and 51.8% were women from Košice region. 39 Methodology respondents (35.5%) come from a complete family, 20 respondents (18.2%) from a single parent family and 51 respondents live in an orphanage (46.2%). The children have lived in orphanages from the average age of 7.76 (SD 4,885). 7 respondents lived in orphanages from birth and three respondents from the age of 16. These were family style orphanages. Simple random selection created the sample.

**Ethical issues.** Respondents were aware of the purpose of the research and the way the data is processed and published. Adolescents completed the questionnaire anonymously and voluntarily.

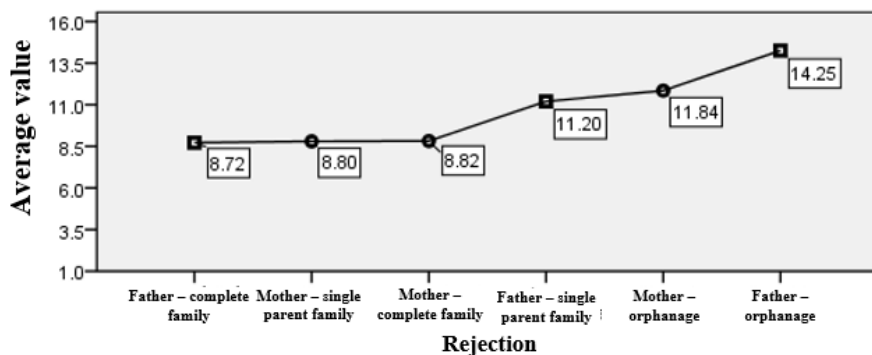
### 3. Research results

Data from the survey were processed in the IBM SPSS 22 statistical software. Prior to the actual analysis of the survey questions, we verified normality of data distribution using the Shapiro-Wilk test, in which normality was not confirmed. In the following analyses we use non-parametric tests, namely the Kruskal-Wallis test for three or more independent choices and the Mann-Whitney U-test.

**SQ1: Is there a statistically significant difference in the scale of rejection by the mother and the father reported by children from complete families, single parent families and orphanages?**

Fig. 1 is a visualization of the average values on the scale of rejection by the mother (circles) and the father (squares). The respondents see rejection by the mother and the father from a complete family as low, as well as rejection by the mother from a single parent family. A higher rejection rate is perceived by respondents from the father in a single parent family. Respondents living in an orphanage perceive rejection by the mother as high (AM 11.84) and rejection by the father as even higher (AM 14.25).

**Rate of rejection in relation to the child's environment**



**Fig. 1.** Average values on the scale of rejection (mother, father) for respondents from a complete family, a single parent family and from an orphanage

We verified statistical significance of the differences visualized above using the Kruskal-Wallis test for three and more independent choices, which confirmed significance of the differences at the significance level of  $p < 0.001$ . Subsequently we used the Mann-Whitney U-test to analyse between which groups, specifically, significant differences exist. The result of the test is shown in table no. 1, and we can conclude that:

- rejection by the **father** perceived by the respondents is statistically significantly different among all the studied groups of respondents. The lowest rejection rate is perceived by the respondents from complete families (AM 8.72), a higher rejection

tion rate is perceived by the respondents from single parent families (AM 11.20) and the highest rejection rate by the respondents from orphanages (AM 14.25), and these differences are statistically significant ( $p < 0.01$ ).

- rejection by the **mother** perceived by the respondents is not significantly different between respondents from a complete family and respondents from a single parent family ( $p > 0.05$ ). These respondents perceive rejection as low (AM 8.80 – single parent family, AM 8.82 – complete family). A statistically significant difference ( $p < 0.001$ ) has been found in perception of rejection by the mother when comparing respondents from complete and single parent families to respondents from an orphanage. Respondents from an orphanage perceive rejection by the mother as higher (AM 11.84).

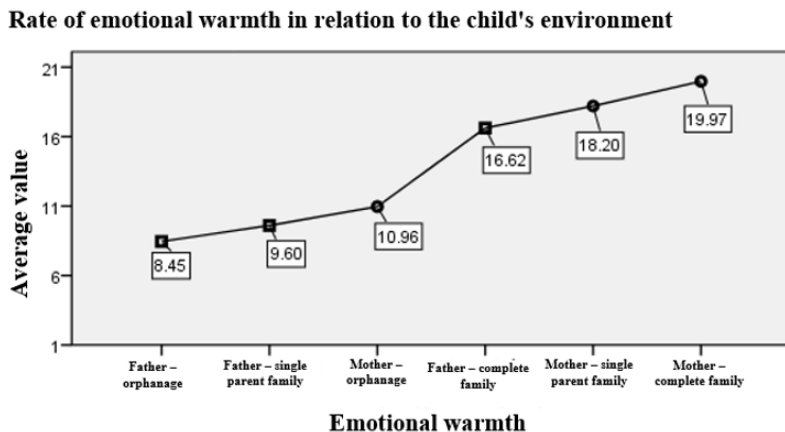
**Table 1.** *U-test: differences in the scale of rejection*

			<b>U-test</b>	<b>Z</b>	<b>Sig.</b>
<i>emotional warmth - father</i>	<i>complete family</i>	<i>single parent family</i>	182.000	-3.399	0.001
		<i>orphanage</i>	211.500	-6.415	0.000
	<i>single parent family</i>	<i>orphanage</i>	241.500	-3.450	0.001
<i>emotional warmth - mother</i>	<i>complete family</i>	<i>single parent family</i>	374.500	-0.258	0.797
		<i>orphanage</i>	432.500	-4.617	0.000
	<i>single parent family</i>	<i>orphanage</i>	220.000	-3.735	0.000

**SQ2: Is there a statistically significant difference in the scale of emotional warmth from the mother and the father reported by children from complete families, single parent families and orphanages?**

Fig. 2 is a visualization of the average values on the scale of emotional warmth from the mother (circles) and the father (squares). The highest rate of emotional warmth is perceived by respondents from the mother in complete families, then from the mother in single parent families and from the father in complete families. A lower rate of emotional warmth is perceived by the respondents from an orphanage from the mother, also by the respondents from a single parent family from the father, and the lowest rate is perceived by the respondents from an orphanage from the father.





**Fig. 2.** Average values on the scale of emotional warmth (mother, father) for respondents from a complete family, a single parent family and from an orphanage

We verified statistical significance of the differences visualized above using the Kruskal-Wallis test, which confirmed significance of the differences at the significance level of  $p < 0.001$ . Subsequently we used the Mann-Whitney U-test to analyze between which groups, specifically, significant differences exist. The result of the test is shown in table no. 2, and we can conclude that:

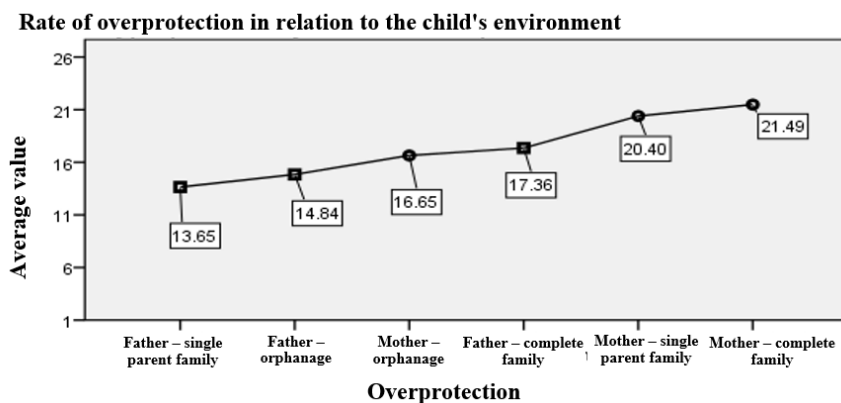
- emotional warmth from the father perceived by the respondents is statistically significantly different among all the studied groups of respondents. Specifically, the highest rate of emotional warmth is perceived by the respondents from complete families (AM 16.62), a significantly lower rate is perceived by the respondents from single parent families (AM 9.60) and the lowest rate by the respondents from an orphanage (AM 8.45). Statistical significance of differences between the last two groups is at the borderline of significance ( $p = 0.049$ ).
- emotional warmth perceived by respondents from the mother is not significantly different between respondents from a complete family and respondents from a single parent family ( $p > 0.05$ ), however, again, the level of significance is at the borderline and the average values are similar, but still higher for respondents from a complete family (AM 19.97) than for respondents from a single parent family – AM 18.20. A statistically significant difference ( $p < 0.001$ ) has been found in perception of emotional warmth from the mother when comparing respondents from complete and single parent families to respondents from an orphanage. The respondents from an orphanage perceive emotional warmth as significantly lower (AM 10.96) in comparison with the two other groups of respondents.

**Table 2.** U-test: differences in the scale of emotional warmth

			U-test	Z	Sig.
emotional warmth - father	complete family	single parent family	52.000	-5.439	0.000
		orphanage	101.500	-7.320	0.000
	single parent family	orphanage	359.000	-1.963	0.049
emotional warmth - mother	complete family	single parent family	269.500	-1.942	0.052
		orphanage	61.000	-7.625	0.000
	single parent family	orphanage	77.500	-5.558	0.000

**SQ3: Is there a statistically significant difference in the scale of overprotection by the mother and the father reported by children from complete families, single parent families and orphanages.**

Fig.3 is a visualization of the average values on the scale of overprotection by the mother (circles) and the father (squares). The highest rate of overprotection is perceived by the respondents from the mother in complete families, then from the mother in single parent families. A slightly lower rate is perceived in complete families also from the father. A lower rate of overprotection is perceived by the respondents from an orphanage from the mother, also by the respondents from an orphanage from the father, and the lowest rate is perceived by the respondents from a single parent family from the father.



**Fig. 3.** Average values on the scale of overprotection (mother, father) for respondents from a complete family, a single parent family and from an orphanage

We verified statistical significance of the differences visualized above using the Kruskal-Wallis test, which confirmed significance of the differences at the significance level of  $p < 0.001$ . Subsequently we used the Mann-Whitney U-test to analyze between which groups, specifically, significant differences exist. The result of the test is shown in table no. 3, and we can conclude that:

- over-protection perceived by respondents from the **father** is not statistically significantly different ( $p > 0.05$ ) between respondents from single parent families and respondents from an orphanage. The respondents from a single parent family perceive overprotection from the father as even lower (AM 13.65) than the respondents from an orphanage (AM 14.84), however, these differences are not significant. Significant differences have been found in perception of overprotection from the father when comparing respondents from a complete family to respondents from a single parent family and from an orphanage. Overprotection from the father perceived by the respondents from complete families is significantly higher (AM 17.36).
- perception of overprotection from the **mother** is not significantly different between respondents from a complete family and respondents from a single parent family ( $p > 0.05$ ). Both groups of respondents perceive overprotection as high – respondents from complete families (AM 21.49), from single parent families (AM 20.40). A statistically significant difference ( $p < 0.001$ ) has been found in perception of overprotection from the mother when comparing respondents from complete and single parent families to respondents from an orphanage. The respondents from an orphanage perceive overprotection as significantly lower (AM 16.65) in comparison with the other two groups of respondents.

**Table 3.** U-test: differences in the scale of overprotection

			U-test	Z	Sig.
overprotection - <b>father</b>	complete family	single parent family	168.500	-3.568	.000
		orphanage	612.500	-3.122	.002
	single parent family	orphanage	444.500	-.841	.400
overprotection - <b>mother</b>	complete family	single parent family	307.000	-1.339	.180
		orphanage	334.500	-5.393	.000
	single parent family	orphanage	250.000	-3.343	.001

In case that, psychological (emotional) needs of a child at the early age are not satisfied adequately, when a child doesn't have attachment figure at his or her disposal, it comes about states of deprivation. The authors J. Langmeier and Z. Matějček (2011,

p. 26), who devoted themselves to the concept of psychological deprivation, define psychological deprivation as a „mental state caused by such living situations when a subject is not given an opportunity for satisfying some his or her basic (vital) mental need in sufficient measure and longtime enough.“ The author M. Vágnerová (2008) adds that deprivation is caused by the shortage of specific emotional stimuli, the absence of stable and reliable relationship with the maternal person and implied security and safety disturbance. We suppose that problematical development of the attachment may arise especially in cases when children live in orphanages, where this phenomenon was researched by the above mentioned authors. Also, according to J. Mikloško (2013), the relational attachment to the mother and father is important protective factor determining healthy, versatile development of a child. As quoted author points out the establishing of healthy attachment in orphanages is more or less limited.

In species-typical rearing conditions, virtually all children develop attachments to their caregivers, and Strange Situation Procedure (SSP) classifications of attachment define qualitatively different patterns. In more extreme rearing conditions, as noted above, such as social neglect or institutional care, attachment may be seriously compromised or even absent. Attachment disorders describe a constellation of aberrant attachment behaviors and other behavioral anomalies that are defined as resulting from social neglect and deprivation. Obviously, no disorder of attachment can exist before a child forms selective attachments, so a developmental age of 9–10 months ought to be required to make the diagnosis.

Attachment disturbances are inherent in foster care for several reasons. First, young children are disproportionately likely to be classified as disorganized in relation to their maltreating parents, with rates of disorganization found to be as high as 90% (Cicchetti & Rogosch & Toth, 2006). Second, as noted, maltreatment, and specifically neglect, are necessary but not sufficient as etiologic conditions for attachment disorders (Zeanah & Smyke, 2009). Third, maltreated children who are removed from their primary caregivers and placed with foster parents they often have never seen before must form attachments to entirely new care-givers. Finally, these children must attempt to resolve and/or repair attachments to their biological parents even as they develop new attachments to foster parents.

In presented contribution, we deal with the attachment in current arrangement of orphanages and we focus on attachment issues in single-parent families too. An interesting research of the attachment in single-parent families was realized by the authors M. Davidová and M. Hardy (2016) who explored memories of parental behavior by adolescents to find out if they differ according to the respondent's family type (complete, single-parent). The survey sample consisted of 114 adolescents (of which 80% were women at the ages between 15 and 19) from Žilina region and a shortened version of the E.M.B.U questionnaire was used as a methodological tool. The research findings show that adolescents from single-parent families have reached higher score of rejection by the father but not by the mother in comparison with adolescents from complete families. Adolescents from single-parent families experienced a lower rate of emotional warmth from the mother and a higher rate from the father too. There was no significant difference between the groups in the scale of overprotection.

On the basis of the above mentioned theoretical foundations we suppose that insecure relational attachment will be represented by the respondents in orphanages in the highest rate, on the contrary, the lowest rate will occur in complete families.

#### 4. Discussion

The presented contribution focuses on the comparison of the attachment between adolescents growing up in a complete family, single-parent family and in orphanage. The E.M.B.U questionnaire was used as a research tool, which measures three factors: rejection, emotional warmth and overprotection, individually for the father and for the mother. The above mentioned questionnaire is an appropriate tool for the attachment measuring especially in case the identification of differentiations with regard to the individual's environment because it identifies the attachment individually for the mother and for the father. The survey sample consisted of 110 respondents of which 35.5% came from a complete family, 18.2% respondents from a single parent family and 46.2% respondents lived in an orphanage. We formulated three research questions and within the first one we looked into differentiations in the scale of rejection by the mother and the father reported by adolescents from complete families, single-parent families and orphanages. We have found out that the lowest rejection rate is perceived by respondents from the father in a complete family and by the mother in a complete family as well as in a single-parent family. A higher rejection rate (on a similar average level) is perceived by respondents growing up in a single-parent family from the father and respondents growing up in orphanages from the mother. The highest rejection rate is perceived by respondents growing up in orphanages from the father.

We subsequently compared the values in the scale of rejection individually for the mother and for the father in relation to the environment where the respondents had grown up. We can conclude that the differences in perception of rejection by the father are statistically significant ( $p < 0,01$ ) in all watched groups, it means that significantly the lowest rejection rate from the father is perceived by respondents from complete families, a bit higher from single-parent families and the highest from orphanages. As far as perception of the rejection by the mother is concerned, there is no statistically significant difference between the respondents from the complete and single-parent families and the rejection rate is low. On the contrary, children from orphanages perceive the rejection by the mother as high and statistically they differ significantly from the respondents from complete and single-parent families.

Within the second research question we looked into the issue if there were any statistically significant differences in the scale of emotional warmth from the mother and the father reported by children from complete families, single parent families and orphanages. On the average, the highest rate of emotional warmth was perceived by adolescents from complete families (from the mother and from the father) and from the mother in a single parent family. Much less lower rate of emotional warmth was perceived by adolescents from the mother growing up in orphanages and even lower by the respondents from single parent families and from an orphanage from the father.

We verified the differentiations in mentioned values using the Mann-Whitney U-test. We can conclude that emotional warmth of the father is significantly different among all the studied groups of respondents. Specifically, the highest rate of emotional warmth is perceived by the respondents from complete families and the lowest rate by the respondents from an orphanage (the differences between the respondents from orphanages and single-parent families are at the borderline of statistical significance:  $p = 0.049$ ). The emotional warmth perceived by respondents from the mother is considered high for the respondents from complete families and for the respondents from single-parent families too, but the respondents from the orphanages perceive it as significantly lower. Just as in the previous case, there was no significant difference between complete and single-parent families in perception of emotional warmth from the mother, on the contrary, emotional warmth from the father perceived by the respondents from single-parent families was lower.

In the last research question we focused on the differentiations in the scale of overprotection by the mother and the father among the studied groups of respondents. Similarly to the previous cases, the highest rate of overprotection was perceived by the respondents from complete families – from the mother and father and from single-parent families – from the mother. A lower rate of overprotection was perceived by the respondents from the orphanages from the mother and from the father and surprisingly the lowest rate of overprotection was perceived by the respondents from the father from a single-parent family.

A comparative analysis has proved that there is no significant difference in the scale of **overprotection** from the father among respondents from complete families and orphanages, so they perceive it in a similar rate as low. There is a difference between a complete family and the previous two groups, while the respondents from a complete family perceive overprotection significantly higher. The perception of overprotection from the mother is not significantly different between the respondents from a complete and single-parent family, which means, they perceive it similarly. The respondents from an orphanage perceive overprotection from the mother as lower in comparison with the other two groups of respondents.

The text stated above shows that respondents from complete families perceive the mother and the father as less rejecting, more emotionally warm-hearted and more overprotective, on the contrary, the respondents growing up in orphanages perceive the mother and even more considerably the father as rejecting, less emotionally warm-hearted and less overprotective. Our results support an opinion of the author J. Mikloško (2013) who thinks that creating of the secure attachment in orphanages is limited.

There are interesting findings from the respondents from single-parent families, while the mother is perceived as less rejecting, emotionally warm-hearted and overprotective, on the contrary, the father is perceived as rejecting, little emotionally warm-hearted and little overprotective. In comparison with M. Dávidová and M. Hardy research (2016) we have reached the same results in the scale of rejection and emotional warmth, however in our research we have noticed difference also in overprotection unlike the quoted authors.

We think that the attachment differences between the respondents from complete and single-parent families could be determined by the situation that children from single-parent families grow up mainly with the mother (in our research 100% respondents) and from this point of view it is understandable that relational attachment to the father is at weaker level. As M. Vohlídalová states (2010) the divorce rate was increasing fluently before the year 1989 and nowadays it has stabilized at the high values. It follows that there is a high percentage of the children who grow up in single-parent families. As research has shown, the problem (among other things) could be not/creating of the secure relational attachment to the father, since the majority of the children after divorce is in exclusive care of the mother (according to the author I. Možný (2011) it is 85% of the cases). Since the year 2010 there has been put into practice the possibility of the **alternating care** of children after a divorce in Slovakia. The parents make an agreement and they alternate during child's upbringing, usually at intervals of 2 to 4 weeks. We think, that in the next researches it would be appropriate to identify the relational attachment to the mother and to the father reported by children who have experienced alternating care. There is a question if the relational attachment to the both parents will be the same, or it will be higher or lower comparing with the complete families or it will be different from the mother and from the father.

An orphanage is a particularly high-risk environment for the formation of mental deprivation (there is a number of care-givers who alternate and a necessary stability is missing which is inevitable especially at an early age). In Slovakia there has been a transformation of orphanages from institutional facilities and especially **professional parenting** is interesting. It is a labor-law relationship of an orphanage and a professional parent and it provides an individual care of a child with a court order institutional care. An orphanage is obliged to create the conditions so that every child under the age of three years who is being admitted to an orphanage could join the professional family after four weeks diagnostics at the maximum. (Act No. 305/2005 Coll. on the Social and Legal Protection of Children and Social Curatorship). The professional family should provide a child with steadier and more warm-hearted environment and an individual care from the professional parents. In the next researches we suggest focusing on the relational attachment identification in case of children growing up in professional families. There is a question if the attachment rate will be higher, the same, or lower in comparison with the children growing up in an orphanage or in complete or single-parent families.

We researched up, that our research has certain limits. Firstly, it concerns the selection of a research sample, which can only be generalized to adolescents in the Košice Region, East Slovakia. Further pitfalls are in questionnaire methods, which always carry the risk of subjective distortion and are largely dependent on the developed ability of the respondent's self-reflection. Respondents also did not have to evaluate their experience with parental characters from an overall perspective, they could be strongly determined by actual emotional survival in relation to parental characters (eg. conflict, disputes, etc.), which could distort the overall picture of upbringing styles and relationship with parents.

## Conclusions

From the point of view of research issue, we suppose that in social work with the family it is important to pay intensified attention to the relational attachment field. An establishing of the secure attachment has an exceptional place and importance in the correct and harmonious individual's development. The complex care of an individual should include mainly filling the needs and develop secure and healthy relationship. On that account we assume that especially at work with the family through implemented solving of family problems, it is necessary to put emphasis on relational attachment and support it among its members. Also at the work with adolescents growing up in orphanages it is particularly needed to put maximum emphasis on attachment area. So we propose to realize an individual approach for adolescents with predominant avoidant attachment, rejection and anxiety as well as to fill their needs to achieve the goal of supporting the secure attachment development. There are clearly defined phenotypes associated with extreme disturbances, including attachment disorders. In most clinical settings, young children's attachment should be assessed routinely, either formally or informally. Moreover, there are many clinical settings in which a thorough knowledge about attachment and its manifestations ought to be a central focus, such as children who are maltreated (especially those in foster care), adopted children (especially post-institutionalized), children of divorce, and children exposed to parental violence. Information about the development of attachment in early childhood is widely available, though it is our impression that many training programs which lack infant mental health expertise do not adequately cover this material or its applications. For this reason we have emphasized throughout that thorough understanding of attachment and its developmental course is essential in all clinical settings serving young children and their families. More specialized attachment expertise will likely enhance clinical work with young children and their families. Though available, these methods require some training to master and may require additional time and resources to implement meaningfully. Our view is that these additional investments are amply rewarded by the richness of the data they provide. Finally, there is a growing evidence base about effective attachment derived/compatible early childhood interventions that have been shown to be effective. They share an emphasis on enhancing caregivers' appreciation of the complexity of the emotional development of young children, the power caregivers have to affect their children, and the kinds of factors within and around the caregiver that may interfere with providing what young children need.

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## A COMPARISON OF THE RELATIONAL BOND OF ADOLESCENTS FROM THE DIFFERENT TYPES OF FAMILY

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### Summary

*In our contribution we looked at the types of relationship of adolescents from biological families (both complete and incomplete families) and the population of adolescents growing up in orphanages and remembered parental behavior where we compare the types of relationship, refusal, hyperprotectivity and emotional warmth in these adolescent groups. We assumed that all adolescents from biological families would not live in complete and functioning families and that is why we will determine the completeness of families in adolescents from biological families. From our point of view, it was interesting to find out differences in the type of relationship and memorized parental behavior in adolescents from biological families (both complete and incomplete families) and adolescents growing up in orphanages. We used two standardized questionnaires for data collection.*

*In presented contribution, we deal with the attachment in current arrangement of orphanages and we focus on attachment issues in single-parent families too.*

*The aim of the research is to identify differences in the attachment between children from a complete family, a single-parent family and an orphanage. The research was carried out by a quantitative strategy, using a E.M.B.U questionnaire ("Own memories of parental rearing behavior") was measured attachment. The E.M.B.U questionnaire consists of 23 items and the respondents answer individually for their mother and father on the 4-point Likert scale. It is used to evaluate how the adult respondents remember the rearing behavior of their parents. It consists of three factors (sub-scales).*

*Data processing was implemented through descriptive and inductive statistics. The Mann-Whitney U-test and Kruskal - Wallis test were used to find differences in attachment between children from a complete family, a single-parent family and an orphanage.*

*The survey sample consisted of 110 adolescents at the ages between 14 and 19, of which 48.2% were men and 51.8% were women from Košice region. 39 respondents (35.5%) come from a complete family, 20 respondents (18.2%) from a single parent family and 51 respondents live in an orphanage (46.2%). The children have lived in orphanages from the average age of 7.76. 7 respondents lived in orphanages from birth and three respondents from the age of 16. These were family style orphanages.*

*An orphanage is a particularly high-risk environment for the formation of mental deprivation (there is a number of care-givers who alternate and a necessary stability is missing which is inevitable especially at an early age). In Slovakia there has been a transformation of orphanages from institutional facilities and especially professional parenting is interesting. It is a labour-law relationship of an orphanage and a professional parent and it provides an individual care of a child with a court order institutional care.*

**Keywords:** *relation bond, emotional warmth, rejection, over-protection, children home.*

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